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CONFIRMATION NO. 8215

<b>SERIAL NUMBER</b> 10/804,929	<b>FILING OR 371(c) DATE</b> 03/19/2004 <b>RULE</b>	<b>CLASS</b> 422	<b>GROUP ART UNIT</b> 3761	<b>ATTORNEY DOCKET NO.</b> DID1039USD1
<b>APPLICANTS</b> Nicola Ghelli, Casale, ITALY; Edgardo Costa Maianti, Mirandola, ITALY; Ivo Panzani, Mirandola, ITALY;				
<b>** CONTINUING DATA *****</b> <i>verified T. 2.</i> This application is a DIV of 09/920,999 08/02/2001 PAT 6,723,283				
<b>** FOREIGN APPLICATIONS *****</b> <i>verified T. 2.</i> ITALY MI2000A001852 08/08/2000				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/02/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>PRW</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 3
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 9561				
<b>TITLE</b> Device for oxygenating blood in an extracorporeal circuit				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	